STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

1. TITLE OF NEWSPAPER: Avon Clarion		2. DATE: 9/27/2024
3. FREQUENCY OF ISSUE: Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY: 52	3B. ANNUAL SUBSCRIPTION PRICE: $ 75In/$85OutState
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers): PO Box 345, Avon, Bon Homme County, South Dakota 57315		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers): 209 S Main Avenue, Wagner, South Dakota 57380		
6. FULL NAME OF PUBLISHER: Barbra Ann Pechous		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.	FULL NAME: Pechous Publications LLC	COMPLETE MAILING ADDRESS: 209 S Main Avenue, Wagner, SD 57380
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.		

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	499	488
B. PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors, and counter sales.	35	36
2. Mail Subscription (Paid and or requested)	331	283
3. Paid Electronic Copies	49	63
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	415	382
D. FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	15	15
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES		
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	430	397
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	69	91
2. Return from News Agents		
G. TOTAL (Sum of E, F1 and F2 – Should equal total shown in A.)	499	488

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

Barbra Pechous
(Signature)

Owner/Publisher
(Title)

State of South Dakota)
§
County of Charles Mix)

Sworn to before me this 27th day of Sept, 2024

Notary Public

My commission expires: Exp: 07-27-2028

(Seal)

COTTON PECHOUS NOTARY SEAL PUBLIC STATE OF SOUTH DAKOTA

Form: SOS REC 051 9/2016